2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106681

Entity Name: LANE BRYANT #4524, LLC

LIEBERMAN, KATHLEEN

BENSALEM, PA 19020

3750 STATE ROAD

Name:

Address:

City-St-Zip:

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3750 STATE ROAD 3750 STATE ROAD BENSALEM, PA 19020 BSC TAX DEPT BENSALEM, PA 19020 **Current Mailing Address: New Mailing Address:** 3750 STATE ROAD **BSC TAX DEPT** BENSALEM, PA 19020 FEI Number: 20-3878426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete LANE BRYANT, INC. Name: Name: 3750 STATE RD Address: Address: City-St-Zip: BENSALEM, PA 19020 City-St-Zip: Title: PRES () Delete Title: () Change () Addition Name: SPECTER, ERIC Name: Address: 3750 STATE ROAD Address: City-St-Zip: BENSALEM, PA 19020 City-St-Zip: Title: () Delete Title: (X) Change () Addition GLUECK, NEAL Name: SULLIVAN, JOHN Name: 3750 STATE ROAD Address: Address: 3750 STATE ROAD City-St-Zip: BENSALEM, PA 19020 City-St-Zip: BENSALEM, PA 19020 () Delete Title: SEC Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Name:

Address:

City-St-Zip:

SIGNATURE: ERIC SPECTER PRES 04/08/2009